RECEIVED **CENTRAL FAX CENTER**

-1-

OCT 0 7 2004

PATENT PD-0436 CIP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of James D. Holker et al.) Group:	3763	3763		
Filed	No.: IMPR AND	O9/779,282 February 8, 2001 OVED ANALYTE SENSOR METHOD OF MAKING SAME	Examiner:)) 1	Maiorino, Ro	Z		
,	I here	by certify that this correspondence is bed States Patent and Trademark Office F	ing facsimile transmitt ax No. (703) 872-9306	ed to the			
	Octob	er 7, 2004 Richard Yoon, Reg. No. 1 Applicant, Assignee, o	o. 42,247	.	Date		
		REQUEST FOR CONT. UNDE	INUED EXAMIN R 37 CFR § 1.114				
Com	Box 145	er for Patents	·				
Dear	Şir:						
1.	[X]	The applicant hereby submaccordance with 37 CFR § 1.					
2.	[X]	This request is being submitted after a Notice of Appeal filed on June 10, 2004 and before abandonment of the application.					
3.	[X]	A responsive Amendment w CFR § 1.114 is enclosed.	vith Request for (Continued Examin	nation under 37		
4.	[]	Do not consider and enter to previously entered as noted or	he response filed	, this re Advisory Acti	sponse was not		
5.	[]	An Information Disclosure St concurrently herewith.	atement with _ ref	erence(s) is being	filed		

-2-

6. [X] The filing fee is calculated as follows, and is based on the number of claims in the application after entry of the enclosed Amendment.

			LARGE ENTITY	SMALL <u>ENTITY</u>
_	Number Filed	Number Extra	Basic RCE Fee Rate \$ 750	Basic RCE Fee Rate \$375
Total Claims _	<u>15</u> - 89 =	0	$x $18 = \underline{\$}$	x \$9 =
Indep. Claims _	1 - 3=	0	x \$78 = <u>\$</u>	x \$39 =
MULTU	x \$130 =			
TOTAL	FILING FEE		\$ <u>750</u>	

- 7. [X] The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 50-0621. A copy of this sheet is enclosed.
- 8. [X] Applicant's petition for a 2 month extension of time is also enclosed.
- 9. [X] The application is assigned of record to: Medtronic MiniMed, Inc.
- 10. [X] Address all future communications to:

Richard Yoon MEDTRONIC MINIMED, INC. 18000 Devonshire Street Northridge, CA 91325-1219

Dated: 10/7 /04

Respectfully submitted,

Richard Yoon Reg. No. 42,247

MEDTRONIC MINIMED, INC. 18000 Devonshire Street Northridge, CA 91325-1219 Telephone No. (818) 576-4110 Facsimile No. (818) 576-6202